



Docket No.

33350-03

Patent

RECEIVED

### COMBINED DECLARATION AND POWER OF ATTORNEY

(Original, Design, Supplemental, Divisional, Continuation, CIP)

FEB 0 3 2003

As the below named inventor, I hereby declare that:

**TECH CENTER 1600/2900** 

## INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### **TITLE OF INVENTION**

Fungicidal Trifluoromethylalkylamino-Triazolopyrimidines.

### SPECIFICATION IDENTIFICATION

the specificat	ion of v	which: (complete (a), (b), or	(c))		
(a)		is attached hereto.			
(b)	$\boxtimes$	was filed on April 23, 2001,  Serial Number 09/840			
		Serial Number 09/840 Express Mail No.		Number not yet known	
(c)		was described and claimed			filed on and as
		amended under PCT Article	19 on	(if any).	
	<u>A</u>	CKNOWLEDGEMENT OF	REVIEW (	OF PAPERS AND DUTY O	CANDOR
		nave reviewed and understan mendment referred to above		ts of the above identified spec	cification, including the claims,
I acknowledg with Title 37		•	hich is mate	rial to the examination of this	application in accordance
			PRIORITY	CLAIM	
patent or inve United States certificate of a	ntors control of Am any PC	ertificate or of any PCT Inter erica listed below and have a T International application(s	national app Iso identifie ) designating	olication(s) designating at leased below any foreign application at least one country other the	on(s) for patent or inventor's
(d) (e)	$\boxtimes$	No such applications have b Such applications have been		ows.	
		(c) is entered above and the l the details below and make		Application which designate laim.	d the U.S. claimed priority,
Earliest Foreig	gn App	lication(s), if any, filed with	n 12 months	s (6 months for Design) prior	to this U.S. Application
[DECLARE.]	DOT- I	Rev 12/1/97]	Page 1 of 6	5	Declaration

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Country	Application No.	Date of Filing (Day, Month, Year)	Priority Claimed 35 USC 119

All Foreign Application(s), if any, Filed More Than 12 Months (6 Months for Design) Prior to This U.S. Application)
CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)

(35 U.S.C. § 119(E))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER	FILING DATE
60/043,820	April 14, 1997

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CLAIM FOR I	BENEFIT OF	<b>EARLIER</b>	U.S./PCT	<b>APPLICA</b>	ΓΙΟΝ(S)
UNDER 35 U.	.S.C. 120				

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application.

# PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120

	U.S. Applic	ations	Status (Check One)			
	U.S. Applications	U.S. Filing Date	Patented	Pending	Abandoned	
1.						
2.						

PC	Γ Applications Designating U.S.	
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NO. ASSIGNED (if any)
3.		
4.	11.00	

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#### **POWER OF ATTORNEY**

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Attorney:	Registration No.:	Attorney:	Registration No.:
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Mary E. Golota	36,814		

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

**TELEPHONE CALLS TO:** 

Susan Shaw Intellectual Property Department BASF Corporation 3000 Continental Drive - North Mount Olive, New Jersey 07828-1234 **Barbara V. Maurer** at Tel. No. (609) 716-**2317** 

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### **DECLARATION**

I hereby declare that all statements herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

### SIGNATURE(S)

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